This presentation will cover performance indicators of relevance to the role of the practice nurse. Clearly they are performance indicators for the entire division, not just the nursing program, but also, it is instructive to look at the indicators from the perspective of what can practice nurses do to support the achievement of the indicators.

New Contracts & PIs: Practice Nursing Central to Success

- Multi-Purpose Agreement (Core funding)
- Primary Care Integration (PCIP)

This presentation will cover the two key contracts with DoHA; the MPA and the PCIP program.

GPV will be able to provide a little funding for divisions to support practice nursing as it has for the last couple of years-the work under this separate agreement with GPV will complement the requirements of these two key contracts for divisions.

New MPA KPIs: Focus

- Access
- Prevention
- CDM
- Uptake of National Initiatives
- Local Priority

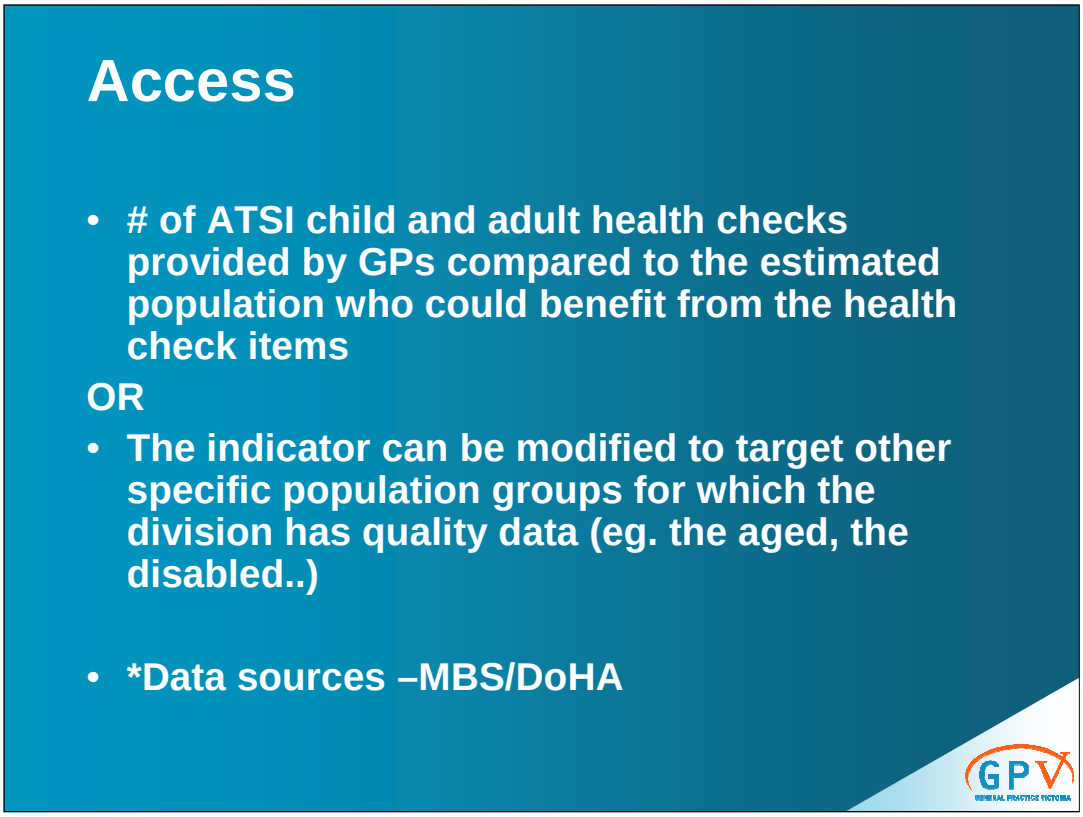
Here are the first two groups of indicators-the top four with a role for nurses

Access

- # & % of PIP practices claiming for PN services
- 10993 – Immunisation
- 10994 – Pap Smear & Health Check
- 10996 – Wound treatment
- 10997 – CDM by PN or AHW
- 10998 – Pap Rural
- 10998 – Pap Smear

 # & % of PIP practices claiming for PN services 10993-10999

DoHA is looking for an increase in the number of services and an increase in the number of practices claiming



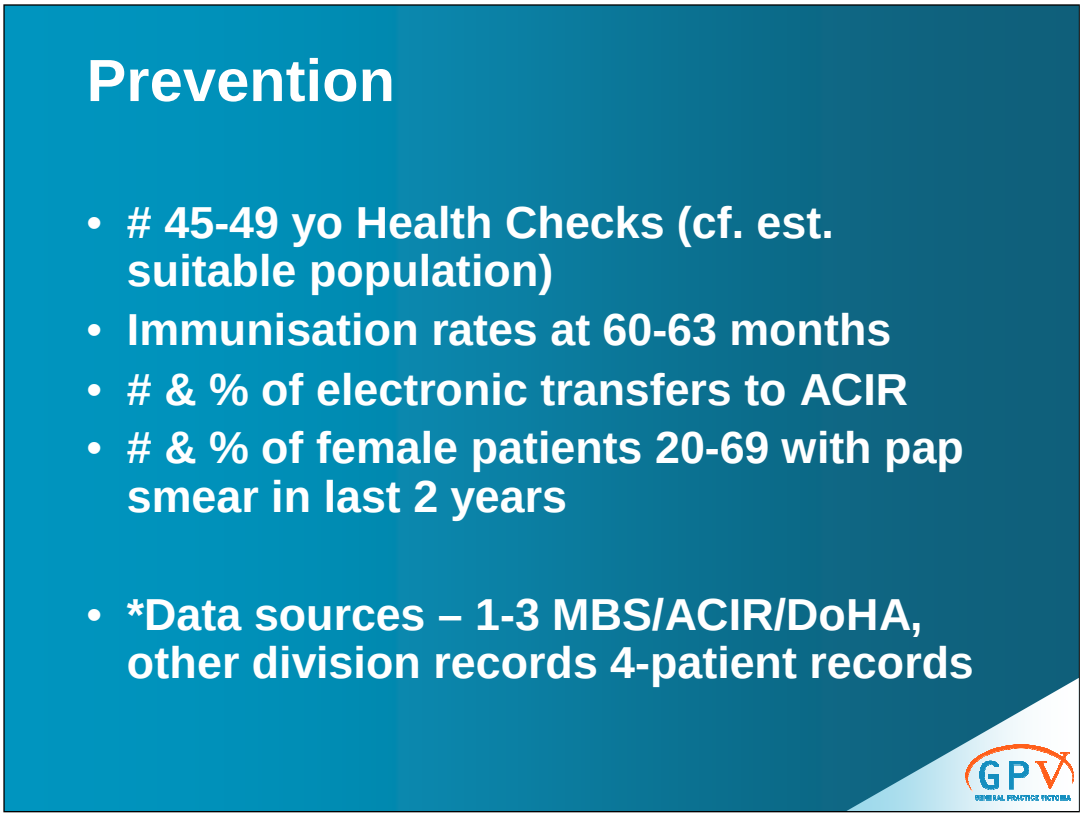
# of ATSI child and adult health checks provided by GPs compared to the estimated population who could benefit from the health check items

OR

The indicator can be modified to target other specific population groups for which the division has quality data-but only if the division can demonstrate that it has very few people of ATSI origin within its boundaries and that the other identified group has clear health problems

DoHA is seeking an increase in the number and % of the indigenous population who have had a check

***Data sources –MBS/DoHA**



The number of **45-49 year old health checks** provided to at-risk patients by general practitioners within the Division (compared to the estimated population who could benefit from the health check).

DoHA is seeking an increase

The average childhood **immunisation** coverage rates for the 60-<63 months age group within the Division.

DoHA is seeking an increase

The number and proportion of electronic transfers of childhood **immunisation** data to the Australian Childhood Immunisation Register (ACIR).

DoHA is seeking an increase

The number and proportion of female patients aged 20-69 whose patient record shows that they have had a **Pap smear** during the previous 2 year period.

DoHA is seeking an increase in:

Number of patients with smears

Number of GPs reporting data

CDM

- # & % Register & recall systems in 80% practices (at least 3 diseases, electronic or not)
- # patients with diabetes meeting various HbA1c measures-data from at least 10% of GPs
- # of patients meeting BP measures from 10% of GPs

*Data sources – R&R-division records, others, APCC or practice visits or other method of obtaining data

The number and proportion of general practices within the Division using electronic register/recall/reminder systems to identify patients with a chronic disease for review and appropriate action, results against at least three diseases, electronic or not, then how many chronic diseases are represented on the electronic systems

DoHA is seeking an increase in:

Number of practices using electronic registers

Number of diseases represented

Number of GPs supplying data

The number of patients within the Division with diabetes whose last recorded HbA1c within the previous 12 months was:

less than or equal to 7.0%;

greater than 7.0% but less than or equal to 8.0%;

greater than 8.0% but less than 10.0%;

greater than or equal to 10.0%; or not recorded.

DoHA is seeking an increase in:

Improvement in the measures

Number of patients being reported on

Number of GPs supplying data and identification of ATSI status (minimum of 10% of GPs)

The number of patients within the Division with coronary heart disease whose last recorded blood pressure within the previous 12 months was less than 140/90 mmHg.

DoHA is seeking: Improvement in the measures

Number of patients being reported on,

Number of GPs supplying data

Both diabetes and CHD data to be obtained from at least 10% of GPs

Uptake of national initiatives

- # & % of GPs preparing and reviewing GP Mental Health Care Plans
- # & % of GPs providing focussed psychological strategies
- # & % of accredited general practices

- *Data sources – 1-2 MBS/DoHA, 4 AGPAL & GPA

The number and percentage of GPs preparing and reviewing GP Mental health Care plans

DoHA seeking an increase

The number and percentage of GPs providing focussed psychological strategies
DoHA seeking an increase

The number and proportion of accredited practices
DoHA seeking an increase

For all reporting it is critical to provide an analysis of why the results are the way they are.

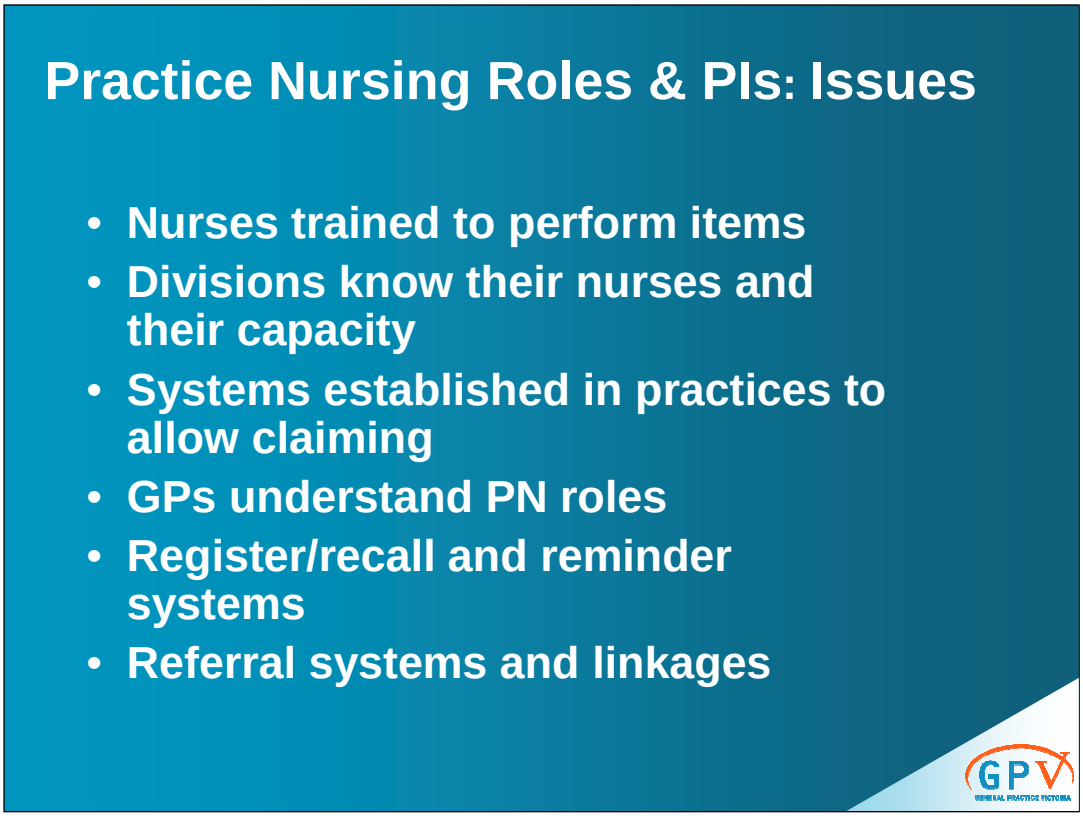
Local Indicator

- To be set for the four year funding cycle, must be a challenge, sound program logic
- Up to 3 optional local indicators, can be changed annually

SMART local indicator in any area of work, but must be a challenge, with sound program logic

PCIP (ABHI) Indicators

- # & % of GPs claiming MBS GP Management Plans, Team Care Arrangements, and Multidisciplinary Care Plans items (721 – 731)
- # & % of AHPs claiming Allied Health Services MBS items (10950 – 10970 and 81100 – 81125)
- # & % of GPs claiming case conferencing items (734 – 779)
- # & % of GPs claiming Medication Management Review items (900 and 903)



Most of the new KPIs for the MPA and some of the PIs for the PCIP program will rely on practice nurses performing their role effectively in practices. Divisions have an incentive to support Practice nursing under their core funding given how central nurses will be to achieving these KPIs.

Further Information

- http://phcris.org.au/divisions/reporting/documents/techdetails/National%20Performance%20Indicator%20Technical%20Details%20May%202008.pdf

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